

EXPRESS MAIL CERTIFICATE

EV 517 996 359 US

Application No.

10/660,131

Filing Date

September 11, 2003

Applicant(s)

David H. Munn et al.

Title

Chemokine Receptor Antagonists as Therapeutic Agents

Examiner

Regina M. DeBerry

Group Art Unit

1647

Type of Document(s)

Express Mail Certificate;

Transmittal Form;

Fee Transmittal for FY 2006 (in duplicate);

Credit Card Payment Form PTO-2038 for \$160.00; Election and Response (2 pages) (in duplicate);

Preliminary Amendment (9 pages) (first page in duplicate); Petition for Extension of Time Under 37 CFR 1.136(a)

(in duplicate);

Supplemental Information Disclosure Statement

(in duplicate);

PTO/SB/08A Listing 7 References; and

Return Postcard

I hereby certify that the documents identified above are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and are addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Stole K. Cooke

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Date Mailed: June 13, 2006

PTO/SB/17 (01-06) Approved for use through 07/31/2006. OMB 0651-0032

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	Complete if Known				
Application Number	Application Number 10/660,131				
Filing Date	September 11, 2003				
First Named Inventor	David H. Munn et al.				
Examiner Name	Regina M. DeBerry				
Art Unit	1647				
Attorney Docket No.	M0351-287806				
	Filing Date First Named Inventor Examiner Name Art Unit	Filing Date September 11, 2003 First Named Inventor David H. Munn et al. 27 Examiner Name Regina M. DeBerry Art Unit 1647			

METHOD OF PAYMENT (check all that apply)							
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :							
Deposit A	☐ Deposit Account Deposit Account Number: 16-1435 Deposit Account Name: Kilpatrick Stockton LLP						.P
For ti	e above-identified de	posit account, the	Director is hereby	authorized to: (ch	eck all that ap	ply)	
	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						for the filing fee
lacktriangleright	☐ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments						
	Under 37 CFR 1.16 mation on this form ma	and 1.17			icluded on this	form Provide cre	dit card
	authorization on PTO-2			on should not be in	ioladea on tino	101111.11101100 010	
FEE CALCUI	ATION						
1. BASIC FI	ING, SEARCH, AI				5 34 5 5151	• * 1011 FFF0	
	FILING	Small Entity	SEARCH	Small Entity		ATION FEES Small Entity	
Application	n Type Fee (\$)		<u>Fee(\$)</u>	Fee(\$)	<u>Fee(\$)</u>	Fee(\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS	CLAIM FEES						Small Entity
<u>Fee Descri</u>						Fee (\$)	Fee (\$)
	over 20 (including Re					50	25
	ndent claim over 3 (i	ncluding Reissues	s)			200 360	100 180
Total Clair	endent claims	Claims Fe	e(\$) Fee	Paid (\$)			Dependent Claims
	-20 or HP=	X	= =	147		Fee (\$)	
HP = highe	st number of total claims	_	—— —— an 20.				
Indep. Cla				Paid (\$)			
	- 3 or HP=	x					
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): Extension of Time (\$60); One Additional Independent Claim (\$100) \$160.00							
		- ·					

SUBMITTED BY				
Signature	Call of Will	Registration No. (Attorney/Agent) 47,040	Telephone	(336) 747-7541
Name (Print/Type)	Cynthia B. Rothschild		Date	June 13, 2006

06-14-06

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PTO/SB/21 (09-04)

10/660,131

Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number

FORM		Filing Date		September 11, 2003				
		First Named Inventor		David H. Munn et al.				
um 1 5		Art Unit		1647				
True he was for all correspondence after initial filing)			Examiner Name		Regina M.	DeBerry		
Total Number of Pages in This Submission			Attorney Docket N	Attorney Docket Number M0351-287806		7806		
ENCLOSURES (check all that apply)								
Fee Transmittal Form		☐ Drawing(s)			After Allowance Communication to TC			
□ Fee Attached		Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences			
Amendment / Reply		Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final		Petition to Convert to a Provisional Application			Proprietary Information			
Affidavits/declaration(s	s)	Power of Attorney, Revocation Change of Correspondence Address			Status Letter			
Extension of Time Reques	st 🗆	Terminal Disclaimer			Other Enclosure(s) (please identify below):			
		Request for Refund			See Remarks			
Express Abandonment Re	equest	CD, Number of CD(s)						
☑ Information Disclosure Sta	tement	Landscape Table on CD						
Certified Copy of Priority Document(s)	Ex	Remarks Express Mail Certificate No. EV 517 996 359						
Reply to Missing Parts/			Payment Form PTO-20 Response (2 pages);)38 for \$16	50.00;			
Reply to Missing Part	DTO/SB/08A Licting 7 Pet			and				
under 37 CFR1.52 or	IRA	Return Postcard						
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Firm	Firm Kilpatrick Stockton LLP							
Signature	Signature GM B July							
Printed Name Cynthia B. Rott			thschild					
Date June 13, 20		ne 13, 2006	Reg. No.		47,040			
CERTIFICATE OF TRANSMISSION/MAILING								
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.								
Signature					-			
Typed or printed name					Date			

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